c - Coordinating Council

10 - Minutes

d - 1961 - 1963

Miss Sherman

MASSACHUSETTS GENERAL HOSPITAL SCHOOL OF NURSING

Minutes of Coordinating Council

Time: March 6, 1961 - 10 A.M. - 12 A.M.

Place: Miss Sleeper's Suite

Members Present: Miss Sleeper, Miss Lepper, Miss Corkum, Miss Corbett, Miss Petzold, Miss Sherwin, Mrs. Horton, Miss Coughlan Miss Farrissey, Miss Kennedy, Miss Grady, Miss Perkins, Miss Gibbons

Members Absent: Miss Hardeman (on vacation)
Mrs. Braman

Agenda:

Announcements

1. Massachusetts Heart Association meeting, March 7th, at Carney Hospital, Title: "Medical and Nursing Management of the Adult with Heart Disease".

2. Received publication from Putnam Inc.
   Title: "Cardio Vascular Surgery" To be placed in Palmer Davis Library

3. Received Book reviews from Mr. Hurwitz of Northeastern University:

   Title: 1. "Patient centered approaches to Nursing" by Abdellah, et al.
   2. "Social Science in Nursing"

   Sent to Palmer Davis Library

4. Reprints of "Journey into Surgery" by Frances Burns of the Boston Globe will be sent to Palmer Davis Library and other departments.

5. Miss Sleeper distributed a paper she has written for the June issue of the A.J.N.
   Title: "From Expectation to Opportunity".

6. Regional Meeting of the Maternity and Gynecological Institute to be held April 12 - 14th at 1200 Beacon Street.

7. Monographs on leadership are available. The list of publications was sent to Library Committee and a list of films available has been referred to the Audio-Visual Aids Committee.

8. New England Hospital Assembly to convene March 20 - 22nd. Miss Lepper has requested tickets for some of the conferences.

9. Mildred Montag will be at Boston University March 13th.

10. Miss Grady presented the plan for self medication by selected patients, under supervision. A statement has been sent to all people involved so that responsibility will be properly delegated.

11. Miss Farrissey discussed new Diabetic Research soon to be conducted in the clinic and continued in the hospital. Further details to be discussed with nursing service.

12. Miss Corbett received confirmation of a plan for a special unit of about eight beds to be construcged on W6 or W7 near the Nurses' station to be used for critically ill patients who need constant care.

13. Miss Lepper discussed plans for a Respiratory Unit to be on PH_2, This unit would be for all hospital patients who need respiratory assistance. An anaesthetist would be in charge of the unit and would be available to give life saving measures.

14. Miss Sleeper announced the arrival of Miss J. Kneepkins from Holland. She has been with WHO and is here to complete a general nursing program. She is a graduate psychiatric nurse and is officially a student at McLean.

15. Miss Sleeper presented the results of the School Cost Study.

    a. The study showed that during the first 6 months of the program a student is valued at 3% of a graduate;
    in the 2nd 6 months - 31%
    " " 2nd year - 41 - 59%
    " " 3rd year - 76 - 93%

    b. The School is reimbursed $446,400 (from tuition and patient care)

    c. The School spent $1,100,000 last year

    d. The cost to the School each year for each student is $1,640 using NLN figures and $1,100 using MGH figures.

    e. A tuition increase has been approved and is as follows:

    1. $300 increase for the first year
    2. $200 " " " second year
    3. $100 " " " third year

    Total tuition increase $600 to be effective September 1961.

    f. Miss Sleeper reported the results of a Questionnaire sent to all parents of students in the School. The questionnaire concerned salary and income.

16. Next meeting Wednesday, May 3rd, 10:00 A.M.

Respectfully submitted,

F. Gibbons
Secretary, pro tem

FG/mld

March 14, 1961

COORDINATING COUNCIL

SEPTEMBER 6, 1961

Presiding: Miss Sleeper
Members present: Miss Lepper, Mrs Braman, Miss Coghlan, Miss Grady, Miss Farrisey, Miss Corbett, Miss Quinlan, Miss Hardeman, Miss Perkins, Miss Petzold, Miss Gibbons, Miss Sherwin and Miss Norton

Exchange Student: Miss Sleeper announced that Miss Ruth Radford of Toronto will be the exchange student to MGH while Miss Holloran is in Belfast for nine months. In another year, a meeting will be scheduled to determine whether or not the exchange program for instructors will continue.

Changes in Nursing Service and School of Nursing

Respirator Unit — Mrs Braman reported a respirator unit for patients with respiratory difficulties will be opened in 2 weeks It will be located on Phillips House 2 and start with four patients and may eventually encompass eight patients

Shock Therapy — Shock Therapy will be available for Phillips House patients starting this fall. The therapy will be administered in the patients room. Such therapy will be carried out between 4:00 and 6:00 P.M.

Radcliffe Program — Miss Perkins stated that the Radcliffe nursing program will be listed with the State as a separate program. Nineteen students are currently enrolled in this program. A Bulletin describing the program will be available this fall.

Northeastern Program — Miss Sleeper announced that Miss Norton will serve as a co-ordinator in general this fall at the same time preparing for the Northeastern enriched program which will commence in September of 1962. A Bulletin describing the Northeastern diploma program will be published shortly.

MGH Program — Miss Petzold described planned activities for the MGH diploma program including a tea for new student nurses on Tuesday, September 12th, graduation and capping.

First Year of Clinical Program — Changes in the first year of the program are aimed at making the curriculum more patient centered. The latter change has resulted in a redistribution of class time and lessened class hours per week. Science classes will be spread over a longer period of time than here to fore. February 16, 1962 will mark the beginning of the September 1961 class. Clinical rotation with three days a week on the wards and two class days. The revision of curriculum content and time in class were in part a result of evaluation of the high attention rate of the last class of students. MGH school of nursing staff will conduct some classes while second year students are on affiliation at McLean Hospital. The latter step is to maintain a thread of the home school philosophy into the affiliation.

Second Year of Clinical Program

Miss Hardeman, co-ordinator of the second and third year announced it is planned for MGH School of Nursing staff to participate in teaching of the MGH students on affiliation at Boston Lying Hospital in the fall of 1962 Faculty are in the process of revising curriculum in pediatric nursing. A new instructor will join the faculty on September 20th. Meanwhile Misses Babcock and Frank are assisting with clinical teaching on White 5. Two new instructors in public health nursing have joined the faculty.

Third Year of Clinical Program

Third year students will have 3 - 4 hours per week of class Thirty hours on advanced nursing will include content on neurological nursing, nursing in burn therapy. The faculty of three instructors for the 3rd year are completely new and are Miss Coligno, Miss Zinsmuster and Miss Craig. Classes for third year students will be completed the last week in June. It was recommended that head nurses and supervisors contact third year instructors at extension 242 with recommendations or needs of third year students.

Medical Research in Bulfinch

Miss Grady gave a brief description of the research program financed in Foto by the United States Public Health Service. This program allows for the 10 beds on Bulfinch 4 and 6 additional beds which may be on other Bulfinch units. The program anticipates 90% occupancy of the 16 beds.

Rehabilitation on White 9

Miss Corbett announced that Miss Gallagher will be returning in September to White 9 as co-ordinator of rehabilitation nursing on White 9. Plans are in the process for a clinical rotation to a variety of nursing units for new graduate nurses in the White Building. The rotation will include the Emergency Ward, Overnight Ward and The Recovery Room.

Clinics

Miss Farrisey stated that the children's clinic now provide a more worthwhile experience for students; this is not so at present in the Diabetic. Construction changes in the medical clinic will also make possible a more worthwhile experience in this area.

Head Nurse turnover in Pediatrics

Miss Quinlan described the uplifted morale of the nursing service staff in pediatrics occasioned by the generosity of 20 new nurse interns who volunteered to help meet the needs of the patients on the pediatric units over the Labor Day weekend. Almost 100% turnover of head nurses and assistant head nurses on the pediatric units will take place in September.

Operating Room Supervisor

Miss Coghlan announced that Miss Koepcke is new supervisor of the White Operating Rooms.

Leadership Monographs

Miss Lepper circulated a listing of monographs on leadership which are available for purchase from Leadership Resources Inc. Washington D. C.

Mrs Defendufer

Mrs Defendufer has joined the nursing service staff to assist in coordination of nursing practices. Her office is on Baker 2.

Miss Anderson, co-ordinator of the second year clinical program, announced it is planned for MGH School of Nursing students to participate in research of the MGH arthritis unit at Boston Lying Hospital in the fall of 1952. Faculty are in the process of evaluating the pediatric nursing. A new instructor will join the faculty on September 20th. Meanwhile Misses Brown and Tyrrell are teaching with clinical teaching on Units 3.

Two new directors in public health nursing have joined the faculty.

Third year students will have 3 - 4 hours per week of clinical practice in advanced nursing with faculty guidance. The faculty neurological nursing, meeting in burn therapy.

of these Instructors for the 2nd year are completely new and Miss Collins, Miss Simmonds and Miss Dreis.

Classes for third year students will be completed the last week in June. It is recommended that head nurses and supervisors content third year instructors in selection of with recommendations or needs of third year students.

Miss Crosby gave a brief description of the research program planning to be done by the United States Public Health Service. This program allows for the 10 beds on Bulfinch and 6 additional beds which may be on either Bulfinch or The program anticipates 90% occupancy of the 16 beds.

Miss Cornell announced that Miss Gallagher will be returning in September to Unit 3 as co-ordinator of rehabilitation nursing on Units 2, Floor 3. Plans are in the process for a clinical rotation to a variety of nursing units for new graduate nurses in the White unit. The rotation will include the Emergency Ward, Outpatient Ward and the Recovery Room.

Miss Burnley stated that the children's clinic has provide a more desirable experience for students. This is not as at present in the Diabetic. Conferences in the medical clinic will also make possible more practical experience in this area.

Miss Quinlan described the uplifted morale of the nursing service staff in pediatrics as a result of the temporary of 20 more nurse interns who will be working help the needs of the patients on the pediatric units over the Labor Day weekend. Almost 100% turnover of head nurses and assistant head nurses on the pediatric units will take place in September.

Miss Foglia announced that Miss Keppel is now supervisor of the Ninth Operating Rooms.

Miss Lapper circulated a listing of emergency equipment which are available for purchase from Lederle Laboratories Inc. Washington D. C.

Mrs Dalandyce has joined the nursing service staff to assist in coordinating of nursing practices. Her office is on Ward 2.

Miss Plummer and Referral Plan

Miss Plummer co-ordinator of Patient Teaching and Referrals has resigned as of October first. Miss Quinlan will assume the responsibility for the Referral Plan and patient teaching. Miss Grogan has transferred to be a member of the Staff Education Office.

Staffing

Miss Lepper described the staff of nurses for the fall will appear to be about the same in number as last year, but with variations in distribution.

Staff Turnover

A member of the Harvard University staff and 2 students will be working with nursing service to determine factors affecting turnover of nursing staff.

Ward Manager

The major project of nursing service in the coming year will be an experimentation with a ward manager plan in an effort to free nurses to do nursing and allow them to become expert in nursing practices. The experiment will start out on ward. The ward manager is to be a non-nurse with management skills and will be under the supervision and direction of nursing service

Director of Medical Affairs

Miss Sleeper informed the group that Mr Degin's office has been relocated on the main corridor of the White Building His former office will be for Dr John Knowles Director of Medical Affairs under Dr. Clark.

McLean Nursing Program

Changes in the McLean Hospital nursing program will occur in the spring of 1952 at which time first year students in the school will come to MGH with 3 nursing instructors from McLean. The change was brought about as a result of accreditation policies stating a school of nursing must control at least three of the major areas in nursing.

Trade School Program

The Trade School Program for Practical Nursing has asked to send all its students to MGH for their clinical experience. This proposal is now under consideration.

Team Nursing

Miss Sleeper raised for discussion the role of the student nurse in the team plan. Miss Lepper gave a brief description of nursing service's concept of the team plan as a device to get the work done. She described from the standpoints of (1) organization of the numbers of nursing personnel on the ward units and (2) quality of patient care In the group's consideration of the role of the student nurse the following factors emerged:

(1) The team plan must be differentiated from "team work" and "team spent"

(2) The student as a member of the team has an opportunity to understand different people and on the team and their different skills.

(3) There are varities of the team on different units and this is good.

(4) the student nurse needs assistance in determining what she is to report to the team leader,,to the head nurse, to the instructor

(5) the understandings of the nursing instructor relative to the team leader also affect the student as a team member.

Miss Pleasant co-ordinator of Patient Nursing and Deferral Plan

Deferrals has resigned as of October first. Miss Golden will assume the responsibility for the Deferral Plan and patient teaching. Miss Grogan has transferred to be a member of the Staff Education Office.

Staffing

Miss Cooper described the staff of nurses for the fall will appear to be about the same in number as last year, but with variations in distribution.

Staff Turnover

A number of the Harvard University staff and 2 students will be working with nursing service to determine factors affecting turnover of nursing staff.

Ward Manager

The action proposed of nursing service in the ward manager will be an experimentation with a ward manager plan, in effect to five rooms to do nursing and allow them to become expert in nursing practices. The experiment will exist out or wrong. The ward manager is to be a team-nurse with management skills and will be under the supervision and direction of nursing service

Director of Medical Affairs

Miss Cooper informed the group that Dr Wentz's office has been relocated on the main corridor of the Main Building The former office will be for Dr John Knowles Director of Medical Affairs under Dr. Glaser.

Nelson Nursing Program

Changes in the Nelson Hospital nursing program will occur in the spring of 1952 at which time first year students in the school will come to MGH with 3 nursing instructors from Nelson. The change was brought about as a result of concentrating patients existing a school of nursing must contain at least three of the major areas in nursing.

Trade School Program

The Trade School Program for Practical Nursing has asked to send all the students to MGH for their clinical experiences. This proposal is now under consideration.

Team Nursing

Miss Cooper raised for discussion the role of the student nurse in the team plan. Miss Cooper gave a brief description of nursing service's support of the team plan as a device to get the work done. The discussion then was centered on (1) organization of the nursing personnel on the ward units and (2) quality of patient care. In the group's consideration of the role of the student nurse the following factors emerged:

(1) The team plan must be differentiated from "team work" and "team spirit"

(2) The student as a member of the team has an opportunity to understand different people and on the team and their different skills.

(3) There are varieties of the team in different units and this is good.

(4) The student nurse needs assistance in determining what he is to report to the team leader, to the head nurse, to the instructor

(5) The understanding of the nursing instructor relative to the team leader also affect the student as a team member.

(6) the head nurse needs to know the objective of the instructor in her choice of assignment for the student to obviate any misinterpretation of terminology.
(7) Head nurses need to receive interpretation when the instructor varies assignments for students as she does to provide a challenge for the student. Co-team leadership is a planned assignment for third year students only. Mrs Colicevo in her contacts with head nurses, and assistant directors of nursing service in their conferences with supervisors and head nurses need to reinforce clear understanding of the role of the student.
(8) Emphasis needs to be placed on the nursing care plan. There was a brief discussion of the difficulties encountered in preparing students with a functional assignment for the administration of medicines.

The meeting was adjourned at 12:10 P.M.

Respectfully submitted

Mary E. Quinlan

MASSACHUSETTS GENERAL HOSPITAL DEPARTMENT OF NURSING

Minutes of the Coordinating Council

Date and Time: November 6, 1961 -- 10-12 A.M.
Place: Miss Sleeper's Suite
Members Present: Miss Sleeper and Miss Lepper
Nursing School: Misses Petzold, Sherwin, Norton, Hardeman, Brady, Perkins
Nursing Service: Mrs. Braman, Misses Coughlin, Corbett, Quinlan, Corkum, Grady, Farrisey

Miss Lepper supplied the Council with the following information:

1) Graduate nurse schools in the fall of 1961:
The hospital provided 72 scholarships for two staff nurses, assistant head nurses and head nurses, supervisors, assistant directors and instructors. The greatest number of points being taken by any one person is 6. The courses being studied at various local colleges and universities are interesting and diverse.

2) Kardex changes in process:
Revisions in the forms used are in the Print Shop. Trial runs will be made in each building very soon. It is hoped that there will be improved communications concerning the element of nursing care and that the procedure for administration of medicines will be both streamlined and safeguarded.

3) The problem has arisen in relation to the appropriate strategy of needles for therapeutic uses because of our relation to the narcotics problem. It will be necessary to have locked up all types of needles since in general the medicine closet affords the only locked area. The plan is to have the distribution of needles transfered from the Central Supply Room to the Pharmacy. A key will then be made available to a person from the Pharmacy so that the needles may be locked up directly. The group was alerted to the need for increasing surveillance of needles. Further action may become necessary.

4) Because retail pharmacists wish no employees of hospitals to be able to purchase drugs there, it has become necessary in order to procure drugs from the M.G.H. Pharmacy
a) to have a prescription from a doctor and
b) for the employee to declare his M.G.H. Unit Number.

5) Report on Staffing:
For the period ending October 2nd, 97 full time staff nurses had been employed. There were fewer resignations than this time last year. However, the total is still 23 less than the 286 total of last year. Two units still have conspicuous shortages: the Operating Room, 12 fewer staff nurses, the White Building, 13 fewer. For the period ending October 30th there were hired 26, resigned 3, showing 12 fewer staff nurses than last year.

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Minutes of the Coordinating Council

Despite this favorable picture it must be noted that the daily average census of patients is 73 more than last year. Miss ~~Lepper~~ Sleeper commented on the remarkable success of nursing as compared with teaching in keeping graduates active professionally. The large number of M.G.H. students graduated in 1961 who returned to M.G.H. to work is gratifying. Everyone was urged to motivate students to stay in nursing and help them comprehend the needs of patients around the clock. Miss Lepper specified a trend in the emergency ward which seemed to stem from the fact that doctors are not available on the weekends. In consequence the emergency ward is much busier and private areas, also. It is seen that Nursing Service must formulate a plan to deal with this situation. In conjunction with this, Miss Farrisey reported that an area has been set up opposite the staff education offices where four 18 hour a day psychiatrists and social workers will be on hand. This service is designed as part of the hospital's work on alcoholism; particularly patients with psychiatric involvements will be handled here. Since patients may be admitted this will also pose problems.

6) It was also announced that a ward manager plan will go into effect on a 7 day 16 hour a day coverage basis in certain areas.

7) Laundry:
By November 12th it is expected that all units of the M.G.H. and five other Boston hospitals will have their laundry processed by a central laundry which has been brought into existence by the hospitals involved. The plan is to include uniforms eventually and the dry cleaning of drapes and the like. Through neglect of a commercial laundry, tons of hospital linen have been lost. An inventory is to be taken to ascertain what are the needs for purchasing. The school was asked to take inventory of all linen items on Friday, November 10th.

Miss Sherwin raised the question of how an individual employee or student nurse who becomes ill and is taken care of in M.G.H. is protected from having his record read by people to whom it should not be available. All agreed that this primarily is a matter of appropriate teaching of all groups. There is no stated policy which indicates that such records shall be locked up although in some instances this is the practice. It was agreed that a greater effort will be made by all to improve the present situation.

Miss Quinlan had cause to wonder about the necessity for students in Burnham to provide direction for volunteers.

Miss Sleeper asked Miss Hardeman to investigate for those students who have evening assignments 1) what problems the students have, and 2) what help are the students getting.

Minutes of the Coordinating Council

Miss Sleeper opened the discussion of the evaluation of nurse interns by explaining that the committee on evaluations is trying to improve them in terms of the school's objectives. One need appears to be to give help to the head nurses and assistants so that they may write more useful reports. While there are some conspicuous examples of extremely good reports, there are more head nurses who appear to need some help. The tool supplied by the school seems not to be used as effectively as it can be. The head nurses do not pin-point in their written reports the specific needs of the student. The reports may not be written until after the student leaves the floor so that a head nurse-student conference is not arranged. After some discussion it was agreed that two steps would be taken to improve this situation. Miss Hardeman, with the help of Miss Petzold and the intern instructors, will in small group conferences with the head nurses and assistants review evaluation and the methods and purposes involved and attempt to clarify the processes. Then Miss Hardeman is to let the assistant directors of nursing service know which reports are less than desirable or are not turned in on time. A second step to be taken is to work out a better system of reminding the head nurses of the dates when the reports are to be due.

Sylvia Perkins
Secretary, pro-tem

lbc

Thermofax & hand copies to:
Sylvia Perkins, Thayer
Helen Sherwin, Walcott
M. E. Quinlan, V-B

3/15/1962

Report of 1st Meeting of "Farrisey Committee"

① At the Outset, we identified ourselves as an ad hoc Committee of the Coordinating Council.

② Our mission was thought to be: exploration of communication and working problems between Nursing Service & Nursing School; consideration of possible solutions to certain communication problems; consideration of existing methods by which School & Service came to know and understand mutual and uni-lateral problems; final report back to Coordinating Council (date not determined).

③ The following points were brought out by one or the other of the member & not necessarily in the order cited:

— There is a great heterogeneity of nursing population to be reached; what info. may be suitable for easy digestion for one might not be as easily handled by another;

— Discussions of the whole (faculty & service) probably have limited value at best;

— The faculty meets 2 X monthly; ditto the service supervisors — there is no

communication at that level – the channels having been established to the top & back down again;
– The food council meetings as presently constituted are primarily reviews of the coming calendar of school or service events;
– The goals of the faculty have not been spelled out by them for the service people; conversely, the service people haven't spelled out today's on the line realities to the faculty;
– The diploma program and its place in the nursing scheme of the future needs to be put into clear focus by some means both to faculty & service personnel;
– The greater involvement of faculty in the transition from school to service needs consideration & exploration;
– The use of a service organ wherein timely notices of interest both of school & service was mentioned;
– The development of a procedure wherein meeting members received material to be covered at meeting in advance the better to discuss issues having prepared (hopefully);

— The need to preserve the hard-won autonomy of the school and yet to keep the nursing group unified — since, as a profession, all must be concerned with how the profession renders its service, how the new members are educated to take their places within the profession; how research is carried on.

— It was suggested that either of these newly learned facts might make an interesting basis of point for the development of school / service mutual understanding:

a) The recent stringencies re: total volume of night & evening duty which can be done by a student nurse;

b) The problems involved in bringing a young nurse to professional maturity & sound judgment (school & service considerations)

COORDINATING COUNCIL
SCHOOL OF NURSING AND NURSING SERVICE

JANUARY 3, 1962

PRESENT — Miss Coghlan, Miss Corkum, Mrs. Bramen, Mrs. Defenderfer, Miss Corbett, Miss Grady, Miss Quinlan, Miss Farrisey, Miss Lepper, Miss Hardeman, Miss Sherwin, Miss Petzold, Miss Brady, Miss Norton, and Miss Sleeper, presiding.

WHITE 11 EXPERIENCE — A recommendation that more interne students have experience on White 11 (neurology) was accepted favorably by the School. Fewer internes will be assigned to White 5 (orthopedics) since all students have experience here. Students are asking for such experience, and it is possible that at some future time, first year students may be assigned to this experience. Miss Hardeman will talk with Miss Hicks regarding the change.

HEAD NURSES SUPERVISOR INSTRUCTOR MEETING — At the next meeting (in about two weeks) of the School and Service groups, the nursing service will present the program relating some of the changes and trends. Miss Sleeper will have notices sent out.

After Miss Petzold read the objectives of the Coordinating Council as written for the BY-Laws of the Faculty, it was decided that a committee from Nursing Service and the School of Nursing be formed to study them and write new ones. Miss Lepper, Miss Quinlan, Miss Petzold, and Miss Hardeman, comprise the committee. Miss Petzold will call the first meeting.

Miss Hardeman presented a list of activities and a set of objectives for student experience on evening and nights, and requested that we study them and make suggestions, returning suggestions by January 15th.

Respectfully submitted,

S. Daphne Corbett

SDC:sjb

MASSACHUSETTS GENERAL HOSPITAL SCHOOL OF NURSING

Coordinating Council

DATE: March 5, 1962, 10 a.m. - 12 noon.

PLACE: Miss Sleeper's Suite

PRESENT: Miss Sleeper, presiding; the Misses Lepper, Norton, Sherwin, Perkins, Hardeman, Coghlan, Brady, Farrisey, Corbett, Corkum, Quinlan, Grady, Petzold; Mrs. Defenderfer and Mrs. Braman

Minutes of the last meeting (Feb. 19, 1962) were approved as circulated.

Announcements:

A. New England Hospital Assembly - March 26,27, 28. Those wishing to attend instructional conferences were asked to indicate preference on circulated paper; Attendance must be limited by space.

B. NLN convention Dec. 6 - Statler Hilton, Boston.

C. Vincent Shaw - April 3-7

D. 91 scholarships awarded this year to members of Nursing Department; bulk of these in Nursing Service.

E. There has been a gratifying response to the search for person to become Unit Manager

F. Two copies of a monograph by Mary Ellen Palmer concerning the extent to which students could effectively evaluate themselves, will be purchased: one for Nursing Service group and one for Palmer Davis Library (faculty use).

G. A form for pooling ideas for the 1963 NLN convention was started in circulation

Agenda

I. Statistics relative to supply and demand of Staff Nurses were reviewed by Miss Lepper. The importance of accurately interpreting the facts and related problems was stressed. See attached sheet for the statistics presented.

II. Experience for students in Nursing.

Miss Lepper is beginning to receive requests for school year beginning end of Aug. 1962. Therefore, Miss Lepper needs to know:

1. Which floors do Diploma and Degree Programs plan to use?

2. How many students, in which class, will be assigned to which floors?

3. When will the experience be needed? How many days/week?

4. Number of, and times when students are assigned to Recovery Room and Operating Rooms: at times operating rooms crowded with various groups of students. Has the school considered the possibility/desirability of a four-week experience instead of eight weeks?

III. Report of some of the highlights of the discussion held by Miss Sleeper with senior students.

a. Nurse internes are expressing interest in intensive care experience with a single patient; this might also incorporate a written patient study or an oral comprehensive examination. Is this a possible and desirable experience? Miss Hardeman and assistants will explore these matters and report back to this group.

b. The possibility of more ward conferences or ward teaching periods for internes was discussed. Team conferences are held with varying degrees of regularity in various units.

It was mentioned that in some instances the Head Nurse feels more responsibility for teaching younger student nurses than older students and nursing staff including auxiliary personnel. It was suggested that the Nursing Service group think about how the Nursing staff, including aides could be helped to feel part of the group, both as contributing participants, as well as recipients of new knowledge, skills, understandings.

c. The seniors have been asked to avoid Labor Day week in planning Senior Activities. It has also been pointed out to them that if these activities are apread out over more than one week's time, more will be able to attend.

d. In order not to exceed the limit of evening experience as set by the Massachusetts State Board of Registration, evening experience for certain students will need to be curtailed. Miss Hicks has prepared and circulated a list of the number of evenings each interne may be assigned. This has been explained to the nurse internes.

IV. The remainder of the meeting was devoted to a general discussion of how we deal or should deal with our responsibilities, to be constantly informed about and interpreters of Nursing.

The discussion encompassed these general topics:

A. The discrepancy between the applicant's or public's concept of Nursing and the realities of Nursing, including education for nursing.

B. The resources of information, data, which now exist of which we should avail ourselves (problems of location of certain materials will be discussed at Wednesday Conference.)

C. The value of School-Service Meetings to share information and discuss issues.

1. Would a 4:30 p.m. - 6:00 p.m. Supper discussion meeting in the Checkerboard Dining Room, following the next School-Service joint meeting be profitable?
This would not se m wise until the group has thought more about the purposes and desired outcomes of such a meeting.

2. The tentative plans for the next School-Service Meeting include these topics:

Anticoagulant therapy in the Clinics
Rotation plan for Staff Nurses
Preparation for Head Nurse positions
New functions of the Medical Clinic Head Nurse

D. A committee volunteered and was formed to explore means of communication within the Nursing Department via an appropriate "organ", either now existing or to be devised.

The committee consists of: Miss Farrisey and Miss Quinlan, co-chairmen; Miss Perkins and Miss Sherwin.

Respectfully submitted,

Natalie Petzold

Statistics - Full-Time Staff Nurses

Figures used are those reported on the first day of each period.

On September 4, 1961, there were 40 fewer full-time staff nurses than on the beginning of September, 1960.

February 19, 1962 - There are 71 more full-time staff nurses than on September 4, 1961- this is 3 more than on February 19, 1961, (one year ago). In addition, there are 36 1/2 more hourly (full time equivalent) nurses than on February, 1961.

Between September 4, 1961, and February 19, 1962, 25 staff nurses were promoted to other positions; e.g. Head Nurse, Asst. Head Nurse, Supervisor.

	No. Full-Time Staff Nurses Presently Employed 2/19/62	No. Hired 6 Periods	No. Terminated 6 Periods
Baker	50	39	24
Bulfinch	30	20	14
Clinics	5	1	2
Oper. Rooms	53	35	15
Phillips House	62	6	9
Vin-Burn	32	33	12
White	59	50	18
	291	184	94

Miss Sherman

5/62 Miss Sherwin

MASSACHUSETTS GENERAL HOSPITAL SCHOOL OF NURSING

14-759 #2
Roles +

Executive Faculty Work Session 5/29/62 in preparation for "Farrisey Committee"
Present: Misses Petzold, Sherwin, Hardeman, Norton, Zinsmeister, Perkins.

Wolfe + Hagen Nursing Leadership Behavior

Purpose: To begin to identify for exchange presentation with nursing service members of Coordinating Council the:

1. functions - abilities for which a graduate of diploma program should be prepared by the present curriculum.
2. the additional leadership abilities she should possess.

Leadership is defined as the capabilities a person has to influence others.

Pro tem list of functions/abilities (to be expanded and specifics supplied) by categories.

1. Technical skills
   Basic nursing care
   Therapeutic care

+ ability to reveal lack of this
Rank + hierarchy in school + service

2. Interpersonal abilities

3. Communication abilities, oral and written

4. Use of problem-solving method.

5. Organization of nursing activities

6. Judgmental abilities

7. Observation

8. Assessment

9. Ability to deal with selected administrative elements

10. Health teaching of individuals
    Identification of need for a patient to be taught.
    Utilization of teaching methods
    Knowledge with which to teach.

11. Self-motivation toward improved functioning.

12. Demonstrate desirable personal behavior: Thoughtful, gracious, courteous, ethical.

#2 Leadership abilities
These are construed to involve peers and ward staff, and professional associates particularly doctors but also technicians, etc.

The new graduate of this program should be able to:

1. Design a course of action for care of patients by two or more people.

2. Implement such a course of action.

3. Designate priorities.

4. Delegate activities.

5. Make certain decisions and know when properly referable to others.

6. Accept responsibility for her own actions.

7. Help others to do so (see #6)

8. Is guided by sound nursing standards

9. Evaluate nursing care, nursing work, nursing plans.

10. Do follow-up on progress

11. Is sensitive to situation and its elements

12. Is sensitive to the people involved in a situation - patients, co-workers, others.

13. Seek appropriate help when properly needed.

14. Contribute to providing a working climate in which abilities of others are promoted to optimal level.

15. Seek to improve the situation appropriately

16. Is knowledgeable about medical-nursing changes, forces, predicaments that affect the situation.

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

MINUTES OF COORDINATING COUNCIL

Date, Time, Place: June 4, 1962 10:00 a.m. - 12:00 noon Miss Sleeper's Suite

Present: Mrs. Braman, Misses Corkum, Coughlan, Farrisay, Grady, Hardeman, Lepper, Norton, Perkins, Petzold, Sherwin, Zinsmeister and Sleeper, Chairman

Absent: Miss Tapper, Mrs. Defenderffer.

Agenda:

Minutes of last meeting accepted as circulated.

Announcements:

Capping - September 13, 1962

Graduation - September 14, 1962

Questionnaires to be given by Dr. Smith June 11 and 18; subsequent dates to be arranged.

The reconstruction of the Bulfinch wards.

The report of the "Farrisey Committee".
A mimeographed pro tem list of (1) functions and abilities for which a graduate of the diploma program should be prepared by the present curriculum and (2) leadership abilities which she should possess was circulated to the members of the council.

It was noted that the dimensions were not spelled out at all. The expectations of Nursing Service would help the school set the demensions.

Miss Farrisey reported on Nursing Service expectations (really a heightened level of expectations).

The M.G.H. graduate should:

1. have a knowledge of basic nursing procedures common to the supportive care of a given patient and that she should report any lack in this area to head nurse.

2. be thought of as a partner in the medical care and service programs for patient care.

3. should have a more comprehensive knowledge of the heirachy at M.G.H. (eg. transitional program so that she may learn counterpart role).

4. have a basic knowledge of ward and care taking routines but should not be expected to be able to assume responsibility for ward administration.

5. a more receptive attitude to orientation for graduate nursing responsibilities.

Discussion: Nursing Service expects M.G.H. graduates to understand and uphold policies, to work in and contribute to group activities and to have a sense of responsibility for and obligation to the hospital.

Nursing Service needs to know more about interneship.

6. have developed maturity enough to ask questions and seek guidance as needed, and to use good clinical judgment. Nursing Service has the responsibility of providing the atmosphere in which this could exist.

Discussion: School stresses leadership role with patient. Assignment to patient care during interneship should be based on knowledge of student achievement.

Head nurse and supervisor know best how to orient students to nights since they have nursing service expectations for patient care.

Recommendations re guide lines and recommendation for fall action:

Mimeograph nursing service expectations, line them up with school expectations. Then clarify differences between two.

References suggested:

Nursing Leadership Behavior. Wolff and Hagen

Patients in Hospitals. Barnes

Roles and Relationships in Nursing Education - 1959 NLN. Code 14-759.

Meeting adjourned at 12 noon.

Respectfully submitted,

K. Hardeman
Secretary, pro tem

KH/lc
9/10/62

MASSACHUSETTS GENERAL HOSPITAL
NURSING DEPARTMENT

11/62

Minutes of the Coordinating Council

Date: September 10, 1962
Time: 10:00 - 12:00
Place: Miss Sleeper's suite
Present: All members except Mrs. Braman and Miss Corbett who were on vacation.

1. The minutes of the previous meeting were approved as circulated.

2. Miss Sleeper informed the council about:
   a. The increase in the budget occasioned by the $5.00/month increase for staff nurses. There continues to be a great need for a higher ratio of graduate nurses to non professional workers.

   b. The changes in the hospital resulting from the increased need for semi-private accommodations: W5, W8, W10, W11 are being redecorated; tray service made more attractive; laboratory costs now the same for Baker and the General; patients are no longer to be "boarded" but admitted to an area and an effort is being made to shift from use of the term "ward" to "floor".

   c. The new cardiac unit for treatment and research between Bulfinch and the Research building.

   d. The possible passage of the Bill HR10117 related to tax deduction for retired workers.

3. Miss Sleeper asked the Ad Hoc Committee to continue with its efforts related to identifying School and Nursing Service expectations of what an M.G.H. student on graduation should be able to be and to do. A report from this committee is due at the next meeting of the Coordinating Council.

4. The remainder of the meeting was spent on discussion related to the program for nurse internes and the responsibilities of service and school. As a new interne year begins, renewed efforts at clarification are indicated so that the supervisors and head nurses, on the one hand, and instructors associated with the internes, on the other hand, may determine where and what are their areas of responsibility. For example,

   (a) The interne's time is planned by the head nurse while special requests are filled out on a form from the Coordinator's office. Who gives the permission? Sometimes classes are involved, others ward time or a combination of both. Questions arise about the meaning of "special request" and how much time is involved. L.A. days must be recorded by Miss Hicks so the form utilized is a record. For days off, the forms are kept in the office of the Assistant Director, Nursing Service division. Request goes to head nurse then to supervisor then to School. Ordinary arrangements are handled as for all staff.

It was suggested that the form might be revised so that any policies of the School which should be known by Nursing Service would appear on the form.

The question was raised by Miss Lepper: "Does the school want to make out time for the internes?" Miss Sleeper would see this practice a denial of the philosophy of the interneship.

Other questions were: "how insure fair practices for the interne-students who move from one clinical area to another and who are not part of any regular staff for the whole year? How insure good relationships among all concerned? If the position of the student-interne is seen to be equivocal, how may her position be improved? Where and how does the student see herself fitting into the Nursing supervision situation? The need for clarification of the functions of head nurses and instructors is seen to be a continuing need. How does the student know when to ask for help from the instructor, when from the head nurse? When may it be appropriate for the head nurse to ask the instructor to come to the floor to help with the students? The head nurse must know the preparation of the student for nursing care. The instructor is trying to help the student fill in any gaps in her knowledge and abilities and to facilitate her adjustment to demands heretofore not made.

The instructor must assess student's progress and check with the head nurse to plan. With six instructors this year, a new plan for reports is possible.

There is evidently considerable role conflict among those concerned: Student-internes, head nurses, and faculty.

Basically, a big question remains to be dealth with. "What yard-stick has the head nurse to measure any graduate nurse which is valid and objective and not created by the tremendous demands of the present plus an unrealistic, rosy view of what her program prepared her to do as often as not in a hospital unlike M.G.H.?"

Sylvia Perkins
Secretary, pro tem.

Miss Sherwin

MASSACHUSETTS GENERAL HOSPITAL 11/62

Department of Nursing

Minutes of Coordinating Council

Date: November 19, 1962 Time: 10:00 to 12:00 Place: Miss Sleeper's suite
Present: Miss Sleeper, Miss Lepper, and Misses Grady, Corbett, Corkum, Coughlin; Miss Tapper by invitation, Mrs. Bremen, Misses Quinlan and Farrisey absent. Misses Petzold, Hardeman, Sherwin, Perkins, Norton, Holleran; Mrs. Calogiro by invitation.

Announcements and Plans

The meetins of the Eastern and Massachusetts Leagues for Nursing were called to the attention of the group.

Miss Holleran, as the new faculty member, was introduced.

The annual Christmas party of the Nursing Department was proposed and dates and committees will be lined up.

Discussion Topic:

(1) The Team Plan experience for nurse-internes: values, role of each participant, expectations, problems.

While the Team Plan does not exist as it may be known in some institutions, elements of the idea are utilized without, however, a discernible pattern or identified commonalities. It would be helpful to know what are the common practices both for the School and for In-service Education. The designation of Team Leader (T.L.) seems to signify that this person has responsibility for more than her own patient assignment and for whatever other workers are assigned to patient care in the area where she is functioning. These workers seek direction from her, receive their assignment from her, and report to her. Thus, she becomes an intermediate link between those giving care and the head nurse. In this capacity it would be desirable for the student nurse-interne to give her own report when staff shifts occur rather than for the head nurse to give the whole report. Variations in this practice exist.

As in all other aspects of the plan, we are faced with handicaps. The students, more than one hundred, arrive on the floors at the time when new staff and new head nurses arrive. More faculty can be assigned to the interneship in the fall then thereafter. The students are not orientated to their new assignments nor to team nursing at the outset. Not all faculty have worked together on this assignment. It is impossible to start either earlier or later in the year because of the sequence of educational experiences, the number of students, the vacation period on the floors.

Emergent Thoughts

What is expected by the head nurse of the student when she designates her team leader must be clarified.

In addition, to the assigned two weeks of team leader experience, there must be a known set of expectations.

Head nurses must be informed by the teachers of what is taught in classes about leadership, the team, and the like.

Teachers must have a plan worked out with the knowledge of the head nurse for the two-week period. The hours when the teacher will be present must be known to the head nurse; inability of the teacher to keep the appointment must be made known to the head nurse.

The teachers can not expect much concrete help in promoting these learnings on the part of the head nurses. The teachers may expect cooperation from the head nurse in the implementation of their plans providing they are long range.

No pattern of team nursing exists here. The instructor will have to familiarize herself with the features of it on each ward.

Teachers are assigned to several wards while their several students may have to be assigned to team leader experience simultaneously. They also have other school commitments.

Being team leader menas taking responsibility for assignment of patient care to whatever other workers are assigned to the area, giving direction to these workers, and evaluating their patient care. The leader should be able to conduct a team conference whether brief or more inclusive. The use of or designation as team leader should not be used indiscriminantly, eg. when only one person is assigned to an area, therefore not in evening or at night.

Instructors may help students on the floors determine what is a wise assignment and how to conduct a conference according to the best principles of leadership. How inflexible is the head nurse's assignment while the two-week experience is going on?

Communication shall be stressed in the teaching. Teaching should be done for possible post-graduate experiences not just the here and now.

Instructors should plot out what is reasonable, what can be done.

Team functions must be clarified.

(2) Doctor's Orders

Miss Petzold brought up the question of validity of doctor's orders when the route of administration and dose may not be specified and abbreviations as hg. for mercuhydrin are used. The problems involved were discussed.

Sylvia Perkins
Secretary, pro tem.

MASSACHUSETTS GENERAL HOSPITAL

Coordinating Council

March 6, 1963

Present: E. Lepper, C. Braman, D. Corbett, A. Corkum, H. Coghlan, F. Grady, C. Halloran, K. Hardeman, I. Norton, N. Petzold, M. Quinlan, M.Tapper and R. Sleeper presiding.

Absent: R. Farrisey, S. Perkins and H. Sherwin.

Miss Sleeper opened the meeting by inviting each member to introduce information having mutual interest for this group:

C. Halloran: Miss Joan Woodward, a Sociologist and English woman, participating in the Exchange Teacher Program will visit and observe here from April 4 to 14, 1963; purpose - to compare attitudes toward nursing in these United States with that of Northern Ireland and England. On April 9th, from 3 - 4 P.M. in Bartlett Hall a meeting for the entire faculty has been planned; a tea will follow. It was suggested that Nursing Service personnel (supervisors and Assistant Directors) would benefit also; Assistant Directors shall poll their supervisors (day, evening and night) and submit list of those interested in attending to Miss Sleeper.

A second suggestion - to provide an opportunity for Miss Woodward to see the Coordinating Council in action. Since no meeting is scheduled for April, a faculty conference will be used to meet this objective. Consequently on April 8th, from 11 A.M. to 12 Noon Assistant Directors shall be expected to attend. The topic for discussion will be the Objectives of the Second Year Program.

K. Hardeman: Miss Hardeman reports that Team Assignments for Internes are going well considering illness rate. Twelve Units are now participating in providing this experience and Miss Hardeman asked if either White 10 could be added in place of Vincent 2 (where plan does not adapt as well). It was suggested that these units might be utilized alternately. Miss Quinlan and Miss Corbett will clear with both head nurses.

As a point of digression Miss Sleeper reviewed briefly a discussion she had with Baker head nurses at which head nurses agreed that a more specific orientation to Team Nursing was needed for Staff Nurses. "If this experience is important for the student, it's important for the staff nurse." The employing agency must do more in the area of In Service.

N. Petzold: Freshmen now in medical and surgical block. One instructor is is assigned to each unit where Freshmen are assigned. During this period there remains a heavy schedule of laboratory experience which will necessitate absence of the instructor from the clinical practice area - in some instances for periods of 3 - 4 hours at a time. Head nurse should be informed. Miss Sleeper injected a comment here re availability of instructors that instructor coverage for the Interne Program was now reduced to three and that head nurses be instructed to page either Miss Halloran or Mrs. Calogiro.

I. Norton, North Eastern Program:

Group consists of 21 students. They are now in their third ten-week plan, Introduction to Nursing. Beginning April 8th for a five-week term laboratory periods of six hours a week will include observations within the hospital and class room instruction covering basic nursing skills. May 10th they move into the dormitory and as of May 13th begin a twelve-week block (May 13th to Aug. 4, 1963) concentrating on basic supportive nursing care. The group will be divided into three, using Vincent 2 and 3 and B. M. 4. September 1st their Medical-Surgical block begins and should be completed by February.

Miss Lepper digressed for a moment to point out that utilizing areas such as B.M. 4 for beginning students emphasis is on supportive care avoiding any direct involvement with the clinical problem. It is important that head nurses know this; they need to understand that there must be progression in teaching.

N. Petzold Report of Meeting with Clinic Head Nurses and Supervisors:

Miss Petzold and the Clinics Head Nurse-Supervisor group met to discuss the new evaluation system for student having clinical experience in this area. Miss Petzold reported on the success of the meeting in that the approach was a searching for answers and the attitude was a positive one. Miss Grady plans to attend next Head Nurse Conference for the purpose of orienting the group to the use of the form; emphasis will be placed on trial use. Miss Sleeper injected the comment that we need to look as the Medical Clinic in respect to student assigned here; dependence of Nursing Service on the student too great.

R. Sleeper Two announcements.

1. This Fall B. L. I. and McLean will increase tuition to include a $75.00 fee for health and a $10.00 library fee. This is the trend throughout the greater Boston area. To increase M.G.H. tuition a recommendation for Sept. 1963 is that students will pay board and room for first six months at $80.00 a month. This will make total entrance fee $2189. Families are being pushed to assume more and more responsibility for nursing education. This means more scholarships (and generous ones) are needed if nursing is to reach its fullest.

2. Federal Aid to Nursing Education: As of February 25, 1963 the report by the Surgeon General's twenty-four-member Consultant Group on Nursing was released. The report now goes to Congress to be voted on. Miss Sleeper circulated a few verifaxed copies for discussion purposes; mimeographed copies will later be distributed to all supervisors, instructors and assistant directors. In reviewing the report Miss Lepper suggested we concentrate our thinking on the expansion of the School of Nursing and the effect on Nursing Service. These were some of the possibilities expressed: We can look forward to having staff in the beginning of their experience; more selective practice; evening experience being sought; Phillips House and Overnight Ward as clinical facilities, etc. Hard years ahead, but exciting!

Meeting adjourned at 12:05 P.M.

Respectfully submitted:
Frances C. Grady, R.N.
Assistant Director of Nursing in Medicine

MASSACHUSETTS GENERAL HOSPITAL
SCHOOL OF NURSING

MINUTES OF COORDINATING COUNCIL

DATE: May 6, 1963

TIME: 10:00-11:45 A.M.

PLACE: Miss Sleeper's suite

PRESENT: All members except Miss Sherwin

ANNOUNCEMENTS:

1. A Silver Tea for the Nursing Service Library Fund will be held on May 23, 1963. Contributions of home-made works from teachers will be greatly appreciated.

2. Miss Lepper announced the need for a faculty advisor for District #8 of the Student Nurse Association. It was agreed that faculty members would be canvassed and names of interested individuals would be given to Miss Lepper.

3. Miss Sleeper reviewed the problem of students raffling a Hi-Fi set and said that she planned to discuss this at the Administrator's Conference in order to get an interpretation of the legality of raffles on hospital premises.

4. The Florence Nightingale Service which all students are expected to attend unless they are on evening duty will be held on May 23, 1963.

5. Miss Sleeper presented the statement from Miss Haynes of N.L.N. regarding the B.S.N. programs voted that a time limit will be set during which graduates of diploma programs will be allowed to pursue a B.S.N. degree with advanced standing credit. Miss Sleeper said she would circulate this statement of the N.L.N. Biennial. She said that the aim of this decision seems to be clear that the diploma school will be considered a "technical" school.

   Discussion included the following points:
   A. Does this mean a 4 year program for B.S.N.? Yes.
      A diploma graduate could pursue a B.S. if she so desired but this penalizes her should she wish to pursue a Master's degree in Nursing.
   B. Will nurse qualifying examinations continue to be used?
      Yes, for the present and probably in the future.
   C. The better B.S.N. programs now include public health nursing. A real problem exists in the Universities' attempts to combine liberal arts and nursing education within a 4 year period - usually resulting in cutting quality and credit of courses.

MASSACHUSETTS INSTITUTE OF TECHNOLOGY
SCHOOL OF MUSIC

MINUTES OF COORDINATING COUNCIL

DATE: May 6, 1963

TIME: 10:00-11:45 A.M.

PLACE: Miss Cooper's suite

PRESENT: All members except Miss Sherwin

AGENDA ITEMS:

1. A Gilbert Tea for the Morris Service Library Fund will be held on May 25, 1963. Contributions of home-made works from members will be greatly appreciated.

2. Miss Cooper announced the need for a faculty advisor for theatre of the Student Opera Association. It was agreed that faculty members would be canvassed and names of interested individuals would be given to Miss Cooper.

3. Miss Sherwin reviewed the problem of students petitioning a Bi-Pi see and felt that she objected to students this at the Academic Council's Conference in order to see an interpretation of the Registry of Petties on Dorpital premises.

4. The Director requested all advisors are expected to attend unless they are on evening duty will be held on May 23, 1963.

5. Miss Cooper presented the standpoint from this Degree of B.A. regarding the B.S.M. program vis-a-vis that a time limit will be set during which graduates of diploma programs will be allowed to pursue a B.S.M. degree with advanced standing credit. Miss Cooper said she would circulate this statement of the V.A.A. Council. She said that the aim of this section seems to be close that the diploma earned will be considered a "technical" school.

Discussion included the following points:

A. Does this mean a 4 year program for B.S.M.? Yes.
A diploma graduate could pursue a B.S. if she so desired but this question her should she wish to pursue a Master's degree in Europe.

B. Will there qualifying examinations continue to be used? Yes, for the present and probably in the future.

C. The better B.S.M. programs now include public teaching practice. A real problem exists in the Universities' attempts to combine liberal arts and musician education within a 4 year period - usually resulting in cutting quality and credit of courses.

D. Is there not a real problem of economics in cutting off graduates of diploma programs within the next twenty years? The emphasis appears to be on encouraging applicants to pursue a basic degree program in nursing.

Student Distribution in Clinical Areas

Miss Lepper reviewed the requests for student experience exclusive of the student nurse interne rotation for September, 1963-August, 1964 so that the members could have an appreciation of the varieties of experience requested for groups of professional and practical nurse students, and the effect of these requests on the attempt to stabilize nursing service throughout the hospital.

Some of the problems discussed by Miss Lepper were:

1. There is a trend to return to multiple groups requesting experience with a variety of needs. The pattern of requests for next year is inconsistent with those made for this year.
2. Requests for the largest numbers of students seem to come during the 3rd and 4th quarter.
3. Large numbers of people in clinical area for "learning" and misunderstanding by some groups about purpose of clinical experience vs job to be done.
4. Increased load for head nurse to cope with many different groups of students and teachers.
5. Should we plan the students' experience in the clinics as primarily on observational experience? Miss Farrisey then questioned whether it becomes the responsibility of the School of Nursing Service to interpret and evaluate this experinece?
6. Although our problems are no different than any other agency trying to meet the needs of many groups, there needs to be continuous interpretation of students' goals to nursing service personnel.

Other discussion:

1. Miss Sleeper pointed out that from the school's point of view, assuming an adequate faculty in number were available, is it better to have a student learn to give comprehensive care to one patient? From the ward's point of view, should we compare the difficulty of having so many teachers? With the present day philosophy it is difficult to combine the aims of providing optimum care for patients with optimum education for students.
2. Miss Sleeper stated that she felt a strictly observational experience in the clinics for diploma program students would be artificial because of the lack of opportunity for public health nursing experiences. With the trend for first and second year students to have less clinical experience the possibility of using Phillips House for experience for younger students may have to be considered.

Review of New England Baptist Hospital Students

The problem of fitting these students into the 6 week experience in the clinics was presented. The N.E.B.H. faculty wishes to retain the 4 week experience and have considered sending a N.E.B.H. faculty member to assume responsibility for these students. Miss Farrisey mentioned the need for a qualified person in such a position.

The question was raised about the optimistic reports about these students during their experience in the clinics. Miss Farrisey felt this was due to their outstanding courtesy, their willingness to assume responsibility for service activities, their interest to participate in the discussions of patients, and their apparent equal competence clinically.

Other members pointed out that these students have no other class commitments during this block which may account for greater interest, but it was felt that the M.G.H. faculty might need to consider evaluating attitudes of M.G.H. students.

Faculty Turn Over

Miss Sleeper discussed the number of faculty resignations expected this summer which will coincide with a large number of resignations in the supervisory group. It is apparent that there will need to be considerable understanding between the School and Nursing Service personnel during the summer.

Progress Report on Patient Referrals

Miss Quinlan reported on the March period which pointed out the following:

1. An increase to 337 from 287 in the previous period including a larger number in the General Hospital.
2. 175 out of 337 were to nursing homes, including excellent pertinent information to help less skilled personnel give competent care.
3. Inclusion of social worker's name and extension number.
4. Referrals included specific information regarding medications, dietary needs, special dressing, Foley catheter care and special treatments.
5. A larger number of referrals for diabetics in the White building than in Bulfinch.
6. Nursing notes are including specific family factors related to patient care.
7. 45 reports were written by student nurses and many students are often contributing pertinent information to be included in referrals.

Miss Sleeper stated that because referrals from M.G.H. were considered so valuable to community agencies she intends to present this to the General Executive Committee to help the medical staff recognize the contribution of these referrals to continuity of patient care.

Report of Institute in Texas

Miss Lepper stated that she had taken some posters made by students on White 10 to the Institute to demonstrate a head nurse's interest in the education of student nurses as well as to indicate to the head nurse that "she was doing a good job."

A head nurse at the Institute requested the use of one of the posters to serve as an example in her own situation and this request was granted.

This meeting was the last regularly scheduled meeting for the year.

Respectfully submitted
Irene Norton
Secretary pro-tem

May 1963
IN/grp

H Sherwin

Massachusetts General Hospital
Coordinating Council
September 11, 1963

Presiding: Miss Sleeper

Members Present: Miss Lepper, Miss Corkum, Miss Farrissey, Miss Corbett, Miss Grady, Miss Coghlan, Miss Quinlan, Miss Petzold, Miss Norton, Miss Hardeman, Miss Sherwin, Miss Keeley

Absent: Miss Perkins, Mrs. Braman

New Freshmen

Miss Petzold reported that 125 freshmen students arrived yesterday. She described the junior proctor system whereby twelve juniors live in at the 20 Charles residence to help the freshmen students with their adjustment to the nursing program. The twelve proctors are elected after the list of nominees have been screened for academic qualifications by a joint committee of students and faculty. The elected proctors had a three day workshop at a Plymouth Inn, preparation to their duties as proctors. The proctor system enhances the involvement of a wider range of students with their classmates in school activities, welcoming and orienting the students to MGH and building an esprit de corps.

Alternate Program students according to Miss Norton, have a similar orientation to the Northeastern campus.

Miss Sleeper described the progress the students are making in expressing themselves in writing as the senior class will now duplicate all of its minutes.

Miss Norton described the meetings which Alternate Program students have with Dr. Misch, a psychologist. These sessions are similar to those experienced by the diploma program freshmen students at MGH. Alternate Program students will meet with Dr. Misch in the fall rather than the summer next year. Miss Norton reported these students led the freshman class academically. Their reactions to their clinical assignments this summer were good. They appeared to move ahead more rapidly as a group. It was possible to hold to the end of the day conferences with the students. The short staff on the units did not

Massachusetts General Hospital
Coordinating Council
September 11, 1963

Presiding: Miss Sleeper

Members present: Miss Lepper, Miss Gorham, Miss Fernicola, Miss Gordon, Miss Grady, Miss Coghlan, Miss Conlan, Miss Petzold, Miss Morton, Miss Norlemon, Miss Sherwin, Miss Kooley

Absents: Miss Perkins, Mrs. Brennan

New Freshmen

Miss Petzold reported that 125 freshmen students arrived yesterday. She described the junior practice system whereby twelve juniors live in at the 20 Charles residence to help the freshmen students with their adjustment to the nursing program. The twelve proctors are elected after the list of nominees have been screened for academic qualifications by a joint committee of students and faculty. The elected proctors had a three day workshop at a Plymouth Inn, preparation to their duties as proctors. The proctor system embodies the involvement of a wider range of students with their classmates in school activities, advising and orienting the students to MGH and building an esprit de corps.

Alternate program students reporting to Miss Morton, have a similar orientation to the Northeastern campus.

Miss Sleeper described the progress the students are making in expressing themselves in writing as the senior class will now duplicate all of its minutes.

Miss Morton described the meetings which Alternate Program students have with Dr. Hixon, a psychologist. These sessions are similar to those experienced by the diploma program freshmen students at MGH. Alternate Program students will meet with Dr. Hixon in the fall rather than the summer next year. Miss Morton reported these students led the freshmen class geographically. Their reactions to their clinical rotations the summer were good. They appeared to move ahead more rapidly as a group. It was possible to hold to the end of the day conferences with the students. The short staff on the units did not

affect them negatively. At Miss Lepper's request, Miss Norton will bring suggestions on how nursing service personnel helped or hindered the summer experience of the students.

Intern Self Evaluation — Miss Hardeman read a senior students' self evaluation of her experience on Bulfinch 3. The evaluation was particularly well expressed and narrated the value of this particular assignment to the student.

Bulfinch — Miss Grady announced that now there is a psychiatrist assigned to every ward in the Bulfinch. The psychiatrists initially attended social service rounds and in the past six months have become more involved with patient care and frequently having weekly conferences with head nurses and their staff.

Senior Clinical Assignments: Miss Hardeman discussed the redistribution of assignment of clinical instructors in the senior program necessitated by the resignation of Miss Restighini. With four instructors for the seniors it is impossible for the instructors to go on evening assignments to assist the students in orientation to evening duty. Miss Hamm, senior evening supervisor in the General Hospital has been notified of this. The instructors will work closely with the head nurses preparing the students for evening duty. The instructors will take over the students' orientation to night duty. Again the instructors will talk with the head nurses prior to giving the orientation. Students will keep a log of their night duty experiences. Mrs. Mc Donough, senior night supervisor, in the General Hospital has been notified of the change.

The orientation of students for night duty in the Baker will continue to be done by the night supervisor. Ward reports on the senior students will be collected by the supervisors from the head nurses and then turned into Miss Hardeman. The evaluation forms will be supplied to each office of the Assistant Directors of Nursing Service. If reports are not turned in by one week after a student has completed her assignment, Miss Hardeman . .

will notify the Assistant Director of Nursing Service concerned. Miss Hardeman asked Miss Quinlan to report on the meeting held on White 5 for the new senior students. The meeting was attended by all the new seniors assigned to White 5, a head nurse from White 5, a day supervisor and an evening supervisor and Miss Quinlan, and Miss Keeley, instructor. The meeting was held on this particular unit where the students had had the earliest evening assignment as seniors. The students did not report they had encountered any difficulties to date in meeting with their assignments. The meeting made it possible to reiterate and discuss the role of the supervisor on evenings and in particular with the students.

Nursing Service and Shortage of Supervisors

Miss Lepper described this year as being the first that the shortage of qualified supervisors has been encountered at MGH. The White Building has three new supervisors on days, Vincent-Burnham and the Bulfinch have no day supervisors as of September 16th. Miss Lepper asked school members to interpret this situation to the rest of the faculty and to students.

Faculty Shortage

Miss Petzold stated that four-five faculty positions are unfilled this fall. Each teaching area made some adjustments. Actual faculty facancies are nearer eight-twelve. Redistribution of assignments to the instructors does not make the gaps as obvious.

Economic Security

There was a general discussion of the MNA economic security program. Two bills are pending which will open up the way for collective bargaining if passed. The basis of the discussion was the statement sent out by MNA describing Attorney Saltonstalls interpretation of the proposed legislation. Miss Sleeper urged attendance at the MNA meetings either in Peabody (District IV) on September 23rd or in Worcester (District V) on September 17th.

Page Masters

Miss Hardeman announced that it has still not been possible for the school to obtain the number of page masters they wish.

Respectfully submitted,

Mary E. Quinlan

MEQ:bw

Miss Helen Sherwin

MASSACHUSETTS GENERAL HOSPITAL
COORDINATING COUNCIL OF THE DEPARTMENT OF NURSING

November 4, 1963

Presiding: Miss Sleeper
Members Present: Misses Coglan, Corbett, Corkum, Farrisey, Grady, Lepper, Quinlan, Mrs. Bremen and Misses Hardeman, Kiely, Norton, Petzold, Sherwin, and Perkins

Visitor: Sister Charlotte, Resident in Nursing Service Administration

The minutes of the meeting of September 11, 1963, were accepted as circulated.

ANNOUNCEMENTS:

1. Luncheon meeting to be held to introduce Miss Voss, newly appointed Dean of the opening College of Nursing at Northeastern University. The bulletin of this college and the architect's plans for its building were circulated.

2. Policy related to time for attending church reviewed. As of November 17, 1963, St. Joseph's Church is discontinuing the 5:45 A.M. Mass. Investigation shows that the times of Masses on Holy Days and Sundays allows ample opportunity for people to attend church.

   Therefore, time off during working hours for persons to attend church is not to be permitted.

3. Miss Lepper reported on the use and distribution among categories of workers in the Nursing Department of scholarships. Ninety-seven individuals received tuition scholarships. The courses taken showed a wide range of interest in subjects related to the functioning of the persons who benefitted by this plan.

4. Miss Sleeper reviewed the two successful Parent's Day held on Saturdays in October. The use of a parent's reactor group to the presentation proved useful. The strengths and values of the school program were apparent it was agreed.

5. Facts about the School
   a. The Endowment of the School of Nursing stands presently at $336,000.

   b. One hundred and sixty-three students were admitted this year in the programs offered:
      126 in Standard Program
      29 in Alternate Program
      8 in Coordinated Program

The geographical distribution of entrants shows a substantial group coming from outside New England.

5. b., cont'd.

The age grouping tends to be homogeneous in the diploma program and ranges from 21 to 25 in the Coordinated Program.

Decreasing numbers of college students are entering the Standard Diploma Program.

The heavy load of the Admissions Committee in the processing of applications was pointed out.

With the increase in fees, substantial financial aid has been given. The group of students receiving this assistance are contributing hours to various activities in residences, library, and the like.

6. Miss Lepper presented the figures showing the numbers of Staff Nurses employed as of October 1, 1963. In five years, the number of full-time Staff Nurses has increased from 254-367; part-time Nurses equated as full-time, from 289 to 409. The number of Staff Nurses hired in September was five years ago 78 and in 1963, 103. The total number of persons hired during the fiscal year ending October 1963 was 296, the greatest number to date.

The daily average census contrasting September 1959 and September 1963 shows the great increase in load.

7. A foldover leaflet distributed by Massachusetts State Nursing Association entitled, "Going Your Way," was presented and discussion followed concerning reactions to the Economic Security Program. Points of view were presented and questions raised. The need to understand better what effect such a proram would have on individual nurses, nurses outside the category of practitioner, and on the administration of nursing services was expressed.

Sylvia Perkins
Secretary, pro tem

1-147:1EC+10d Administration

I-School of Nursing